## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			2/1/
O.I.P.E. CLASSIFIER		12/	11/0
FORMALITY REVIEW	95	573	02-27-01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

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If more than: 150 claims or 10 actions staple additional sheet here